



Lakeway Swim Center  
2015 **PRIVATE** Swim Lesson Registration Form

(512)-261-3000  
www.lakeway-tx.gov/swimcenter

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_ M F

Parent's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone# ( ) \_\_\_\_\_ Work# ( ) \_\_\_\_\_ Cell# ( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

*All group classes are Monday through Thursday for one week. There are no refunds for missed classes. Add \$10 late fee for registrations submitted after the registration deadline.*

☐ **Session 12**—Ages 3 & up: Registration Deadline Jun 24; Class Dates Jun 29-Jul 2. Four 30-minute lessons. Cost: \$120 resident/\$160 non-resident.

Indicate time preference (mark 1st, 2nd, 3rd, etc. choice) \_\_\_\_\_ 9:00-9:30 \_\_\_\_\_ 9:30-10:00 \_\_\_\_\_ 10:00-10:30  
\_\_\_\_\_ 10:30-11:00 \_\_\_\_\_ 11:00-11:30 \_\_\_\_\_ 11:30-12:00

☐ **Session 13**—Ages 3 & up: Registration Deadline Jul 1; Class Dates Jul 6-9. Four 30-minute lessons. Cost: \$120 resident/\$160 non-resident.

Indicate time preference (mark 1st, 2nd, 3rd, etc. choice) \_\_\_\_\_ 9:00-9:30 \_\_\_\_\_ 9:30-10:00 \_\_\_\_\_ 10:00-10:30  
\_\_\_\_\_ 10:30-11:00 \_\_\_\_\_ 11:00-11:30 \_\_\_\_\_ 11:30-12:00

☐ **Session 14**—Ages 3 & up: Registration Deadline Jul 8; Class Dates Jul 13-16. Four 30-minute lessons. Cost: \$120 resident/\$160 non-resident.

Indicate time preference (mark 1st, 2nd, 3rd, etc. choice) \_\_\_\_\_ 9:00-9:30 \_\_\_\_\_ 9:30-10:00 \_\_\_\_\_ 10:00-10:30  
\_\_\_\_\_ 10:30-11:00 \_\_\_\_\_ 11:00-11:30 \_\_\_\_\_ 11:30-12:00

☐ **Session 15**—Ages 3 & up: Registration Deadline Jul 15; Class Dates Jul 20-23. Four 30-minute lessons. Cost: \$120 resident/\$160 non-resident.

Indicate time preference (mark 1st, 2nd, 3rd, etc. choice) \_\_\_\_\_ 9:00-9:30 \_\_\_\_\_ 9:30-10:00 \_\_\_\_\_ 10:00-10:30  
\_\_\_\_\_ 10:30-11:00 \_\_\_\_\_ 11:00-11:30 \_\_\_\_\_ 11:30-12:00

As the parent of a participant in the above program(s) sponsored by the Lakeway Parks and Recreation Department, I do hereby covenant and agree that I assume all risks associated with participation in the Lakeway Parks and Recreation's authorized Program, and do hereby accept that any injury or injuries my child might suffer as a result of my child's participation in such activity shall be my own responsibility and that under no circumstances may I maintain any cause or causes of action against the City of Lakeway which arise out of or are in any way associated with participation in the Lakeway Parks and Recreation Department's authorized program. Furthermore, I covenant and agree that this document shall be admissible in any court or competent jurisdiction which adjudicates any cause or causes existing between myself and the City of Lakeway. Lastly, by this document, I do hereby authorize the exclusive use by the City of Lakeway of any photograph or photographs which the City of Lakeway may take of my child's participation in the City's authorized activity. I, the undersigned parent/guardian of the individual named above, a minor, do hereby agree to allow the individual named herein to participate in the aforementioned program and authorize the program directors and/or instructors as Agents for the undersigned to consent to Medical, Surgical and/or Dental Examination, in addition to any and all other treatments that may be deemed necessary by medical personnel. It is understood that this activity involves an element of risk and a danger of accidents and knowing those risks I hereby assume those risks. In addition, I understand that by signing this agreement, I hereby release and discharge the City of Lakeway from any and all liability resulting in injury associated with my child's participation in this activity.

Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ Resident or ☐ Non-resident Amount Paid: \_\_\_\_\_ Receipt # \_\_\_\_\_ Date Paid: \_\_\_\_\_  
Payment: Cash \_\_\_\_\_ Check# \_\_\_\_\_ Credit Card: Visa MasterCard Exp \_\_\_\_/\_\_\_\_  
Card Number: \_\_\_\_\_ Name on card (same as above) or \_\_\_\_\_